

Edinburgh Postnatal Depression Scale (EPDS)

Name: _____ Baby's Name: _____

Your Date of Birth: _____ Baby's Date of Birth: _____ Phone: _____

Developmental and Mental Health screenings are recommended by the American Academy of Pediatrics to provide comprehensive care to your child. RTCPediatrics bills these directly to your insurance company. I understand and agree that I am financially responsible for any charges not covered/paid by my insurance carrier for services provided by RTCPediatrics including but not limited to co-insurance, copayment, and/or deductibles and agree that I am to pay any of these non-covered charges.

Signature: _____ Date: _____

You recently had a baby and we would like to know how you are feeling. Please check the answer that comes closest to how you have felt **IN THE PAST 7 DAYS**, not just how you feel today.

In the past 7 days:

<p>1. I have been able to laugh and see the funny side of things.</p> <ul style="list-style-type: none"> <input type="radio"/> As much as I always could <input type="radio"/> Not quite so much now <input type="radio"/> Definitely not so much now <input type="radio"/> Not at all 	<p>6. Things have been getting on top of me.</p> <ul style="list-style-type: none"> <input type="radio"/> Yes, most of the time I haven't been able to cope at all. <input type="radio"/> Yes, sometimes I haven't been coping as well as usual. <input type="radio"/> No, most of the time I have coped quite well. <input type="radio"/> No, I have been coping as well as ever.
<p>2. I have looked forward with enjoyment to things.</p> <ul style="list-style-type: none"> <input type="radio"/> As much as I always could <input type="radio"/> Not quite so much now <input type="radio"/> Definitely not so much now <input type="radio"/> Hardly at all 	<p>7. I have been so unhappy that I have had difficulty sleeping.</p> <ul style="list-style-type: none"> <input type="radio"/> Yes, most of the time <input type="radio"/> Yes, sometime <input type="radio"/> Not very often <input type="radio"/> No, not at all
<p>3. I have blamed myself unnecessarily when things went wrong.</p> <ul style="list-style-type: none"> <input type="radio"/> Yes, most of the time <input type="radio"/> Yes, some of the time <input type="radio"/> Not very often <input type="radio"/> No, never 	<p>8. I have felt sad or miserable.</p> <ul style="list-style-type: none"> <input type="radio"/> Yes, most of the time <input type="radio"/> Yes, quite often <input type="radio"/> Not very often <input type="radio"/> No, never
<p>4. I have been anxious or worried for no good reason.</p> <ul style="list-style-type: none"> <input type="radio"/> No, not at all <input type="radio"/> Hardly ever <input type="radio"/> Yes, sometimes <input type="radio"/> Yes, very often 	<p>9. I have been so unhappy that I have been crying.</p> <ul style="list-style-type: none"> <input type="radio"/> Yes, most of the time <input type="radio"/> Yes, quite often <input type="radio"/> Only occasionally <input type="radio"/> No, never
<p>5. I have felt scared or panicky for no very good reason.</p> <ul style="list-style-type: none"> <input type="radio"/> Yes, quite a lot <input type="radio"/> Yes, sometimes <input type="radio"/> No, not much <input type="radio"/> No, not at all 	<p>10. The thought of harming myself has occurred to me.</p> <ul style="list-style-type: none"> <input type="radio"/> Yes, quite often <input type="radio"/> Sometimes <input type="radio"/> Hardly ever <input type="radio"/> Never

Administered/Reviewed by: _____ Date: _____

1. Source: Cox, J.L., Holden, J.M., and Sagovsky, R. 1987. Detection of postnatal depression: Development of the t10-item Edinburgh Postnatal Depression Scale. *British Journal of Psychiatry* 150:782-786

2. Source: K.L. Wisner, B.L. Parry, C.M. Piontek, Postpartum Depression *N Engl J Med* vol. 347, No 3, July 18, 2002, 194-199

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